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CONFIRMATION NO. 9327

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|--|---|-------------------------------|---|--------------------------------------|
| SERIAL NUMBER 10/729,043 | FILING OR 371(c) DATE 12/05/2003 RULE | CLASS 705 | GROUP ART UNIT 3694 | ATTORNEY DOCKET NO. WS-104 |
| APPLICANTS Scott Goldthwaite, Hingham, MA; ✓ William Graylin, Woburn, MA; ✓ | | | | |
| ** CONTINUING DATA ***** This appln claims benefit of 60/431,567 12/06/2002 and is a CIP of 10/205,768 07/26/2002 and is a CIP of 10/625,823 07/23/2003 and is a CIP of 10/695,585 10/28/2003 ✓ checked AV | | | | |
| ** FOREIGN APPLICATIONS ***** - NONE - ✓ | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY** ✓ AV ** 08/07/2004 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Signature</u> <u>AV</u> Examiner's Signature Initials | | STATE OR COUNTRY MA | SHEETS DRAWING 16 | TOTAL CLAIMS 45 ✓ |
| | | | | INDEPENDENT CLAIMS 2 ✓ |
| ADDRESS 27769 | | | | |
| TITLE System and method for mobile payment and fulfillment of digital goods | | | | |
| FILING FEE RECEIVED 610 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |